

## Puppy/Adult Airedale Terrier Questionnaire – Part 1

The following questions are being asked of you so that the right puppy and the right placement of each puppy is made by bringing the various requirements of both the puppy and his or her new owner(s) into perspective, BEFORE a choice is made. I hope you will agree that the animal's welfare must be our foremost consideration in considering a placement. Please answer the following questions as completely as you can, and return this form when you've finished.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cellular Phone: \_\_\_\_\_

Referred by or website: \_\_\_\_\_

How long have you lived at your present address? \_\_\_\_\_

Type of dwelling?

Home       Apartment       Condominium       Duplex       Mobile Home

Do you own, rent or lease? \_\_\_\_\_

If you rent/lease, are you permitted to have a puppy/dog\*? \_\_\_\_\_

If a condominium, do your by-laws permit a puppy/dog\*? \_\_\_\_\_ Is there a weight limit? \_\_\_\_\_ lbs.

\*Please provide/attach confirmation or landlord's formation/or by-laws: \_\_\_\_\_

Do you have a fenced yard? \_\_\_\_\_

If no, how do you plan to keep your puppy/dog contained when outside? \_\_\_\_\_

Where will the puppy/dog be kept during the day? \_\_\_\_\_

Where will the puppy/dog be kept during the night? \_\_\_\_\_

Is anyone home during the day? \_\_\_\_\_

Where will your puppy/dog sleep? \_\_\_\_\_

What if any activities would you like to share with your puppy/dog?

Walking       Visiting friends and/or family       Doesn't mind being alone

Hiking       Laying on the couch       Cuddles

Riding in the car       Likes to play with people/children/other pets

Other: \_\_\_\_\_

What do you expect the activity level of this Airedale Terrier to be?

Very High       High       Average       Below Average

What made you consider the Airedale Terrier breed? \_\_\_\_\_

Puppy/Adult Airedale Terrier Questionnaire – Part 2

Name: \_\_\_\_\_

Do you currently have any pets?

*If yes, please list:* \_\_\_\_\_

*If no, when did you last have a pet or is this your first puppy/dog?* \_\_\_\_\_

Do you agree to the terms of the contract including the spay/neuter clause on pet quality puppies? \_\_\_\_\_

Does anyone in your household have allergies to animals? \_\_\_\_\_

Have you ever surrendered, returned, sold or given away a pet? \_\_\_\_\_

*If yes, what were the circumstances?* \_\_\_\_\_

What would you consider a reason to return your puppy/dog? \_\_\_\_\_

What would happen to your puppy/dog if you became incapacitated and were unable to continue to care for your puppy/dog? \_\_\_\_\_

Do you have any questions or comments? \_\_\_\_\_

**References:**

*Note:* Please notify the individuals below that you have provided your consent for these individuals to provide us with information regarding you and/or your family about family pets.

**Current or most recent Veterinarian:**

*Animal Clinic phone number:* \_\_\_\_\_

*Veterinarian Name:* \_\_\_\_\_

**Reference #1:**

*Reference #1 phone number:* \_\_\_\_\_

*Reference #1 Name:* \_\_\_\_\_

**Reference #2:**

*Reference #2 phone number:* \_\_\_\_\_

*Reference #2 Name:* \_\_\_\_\_

*By submission of this form I am authorizing the veterinarian and references named above to release/provide information concerning prior or present care of my pets.*

*I have not, nor has anyone in my household ever been charged with any form of animal abuse, neglect or cruelty. I am 18 years of age or older and have read this questionnaire in its entirety and have answered each question honestly and to the best of my knowledge.*

Name: \_\_\_\_\_ Signature and date: \_\_\_\_\_